

INSTRUCTIONS FOR FILING A ZONING PROTEST

Protests to proposed rezonings are regulated by Section 20.120.400 of the San Jose Municipal Code. Each protest petition shall:

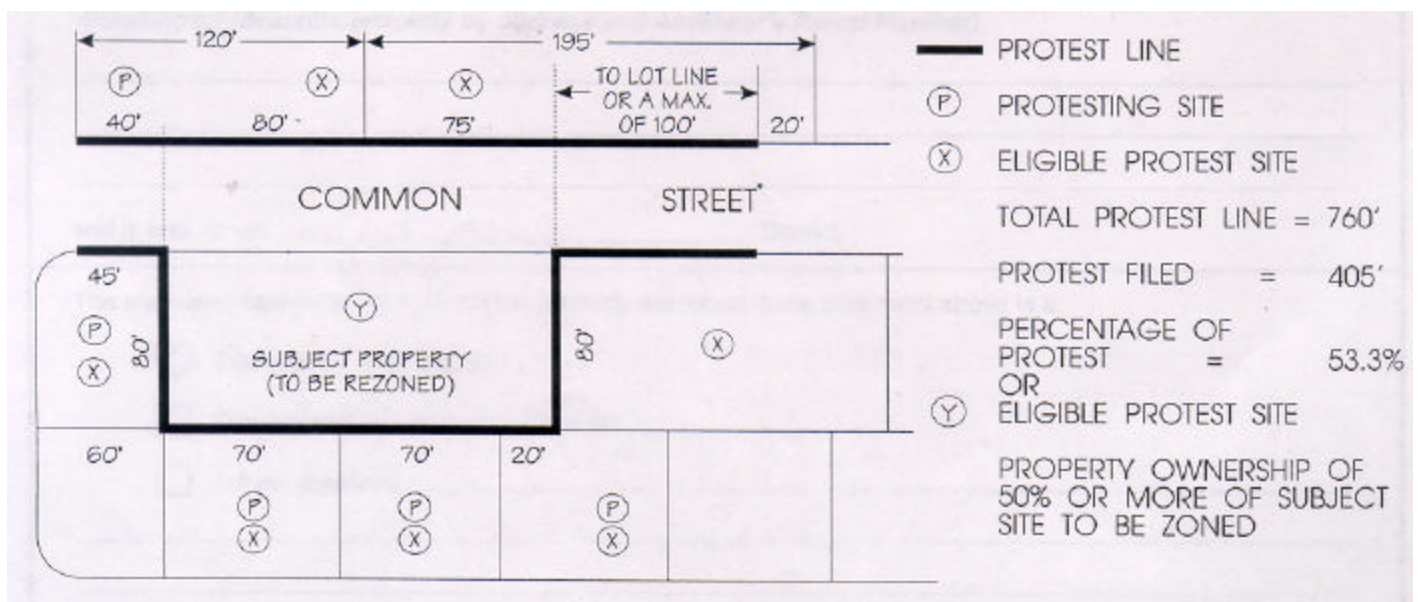
- Be submitted on a form furnished by the Director of Planning for that purpose. (A separate protest petition shall be filed for each protesting site.)
- Set forth all information requested.
- Have the signature(s) acknowledged before a Notary Public.
- Be filed in the office of the Director of Planning, 801 North First Street, Room 400, San Jose, CA 95110-1795, no later than the 5th day before the opening of the City Council hearing (e.g., for a Tuesday hearing, by 5:00 p.m. the previous Thursday).

The Director of Planning in making his investigation of the protest, shall not be limited to the information contained in the protest petition, but may request additional information from the protestant. Failure of the protestant to provide the additional information within the time prescribed by the Director of Planning, or inability of the Director to make a determination regarding the protest petition, despite the additional information, shall void the protest and it shall not be considered.

Please Note: Eight (8) votes from the City Council would be required to overrule the protest.

Any questions regarding zoning protest procedures can be directed to the Department of Planning, Building and Code Enforcement at the above address, (408) 277-4576.

EXAMPLE



PLEASE SUBMIT THIS APPLICATION IN PERSON TO THE PLANNING DIVISIONS, CITY HALL, ROOM 400,
Mondays, Wednesdays, Fridays from 9:00 a.m. to 5:00 p.m. or Tuesdays, Thursdays from 10:00 a.m. - 5:00 p.m.

**CITY OF SAN JOSE**

Department of Planning, Building and Code Enforcement
Planning Divisions, 801 North First Street, Rm 400
San Jose, California 95110-1795
(408) 277-4576

Website: www.ci.san-jose.ca.us/planning/sjplan

ZONING PROTEST APPLICATION

| TO BE COMPLETED BY PLANNING STAFF | | | |
|-----------------------------------|--------|------------------|------------------------|
| FILE NUMBER | | COUNCIL DISTRICT | DATE _____ BY _____ |
| QUAD # | ZONING | GENERAL PLAN | |
| REZONING FILE NUMBER | | | |

| TO BE COMPLETED BY APPLICANT (PLEASE PRINT OR TYPE) |
|--|
| ADDRESS OF PROPERTY BEING PROTESTED |
| ASSESSOR'S PARCEL NUMBER(S) |
| REASON OF PROTEST I protest the proposed rezoning because _____ _____ _____ Use separate sheet if necessary |
| The property in which I own an undivided interest of at least 51%, and on behalf of which this protest is being filed, is situated at: (describe property by address and Assessor's Parcel Number) _____ _____ _____ and is now zoned _____ District. |
| The undivided interest which I own in the property described in the statement above is a: <input type="checkbox"/> Fee Interest (ownership) <input type="checkbox"/> Leasehold interest which expires on _____ <input type="checkbox"/> Other: (explain) _____ _____ _____ |

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Zoning Protest.pm65/Application Rev. 6/27/2002

ZONING PROTEST APPLICATION

| SIGNATURE(S) OF PROTESTANT(S) | | | |
|---|------|------------------------|----------|
| <p>This form must be signed by ONE or more owners of an undivided interest of at least 51% in the lot or parcel for which such protest is filed, such interest being not merely an easement. A tenant under a lease which has a remaining term of ten years or longer shall be deemed an "owner" for purposes of this protest. When the owner of an eligible protest site is a legal entity other than a person or persons, the protest petition shall be signed by the duly authorized officer(s) of such legal entity. When such legal entity is a homeowner's association, the protest petition shall be signed by the duly authorized officer(s) of such association, or, in lieu thereof, by 51% of the members of the association.</p> | | | |
| PRINT NAME | | DAYTIME TELEPHONE # | |
| ADDRESS | CITY | STATE | ZIP CODE |
| SIGNATURE (Notarized) | | DATE | |
| PRINT NAME | | DAYTIME TELEPHONE # | |
| ADDRESS | CITY | STATE | ZIP CODE |
| SIGNATURE (Notarized) | | DATE | |
| PRINT NAME | | DAYTIME TELEPHONE # | |
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| Use separate sheet if necessary | | | |

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